RESOURCE AND PATIENT MANAGEMENT SYSTEM

GPRA+ Reporting System Package
(BGP)

Technical Manual

Version 1.0
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Information Technology Support Center
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Albuquerque, New Mexico

PREFACE

The GPRA Reporting System (GPRA+) is based on an application designed by the Aberdeen Area (GPRA2000). GPRA+ provides local sites and Areas with a straightforward way to produce and review their local GPRA data for those current year clinical GPRA indicators that are based on RPMS data.

Administrative and clinical users will be able to review individual or all indicators at any time, including:

- Identify potential data issues in their RPMS (i.e., missing or incorrect data)
- Identify specific areas where the site is not meeting the indicator in order to initiate business process or other changes
- Quickly measure impact of process changes on indicators
- Identify areas meeting or exceeding indicators to provide lessons learned

Sites can run reports as often as they want and use GPRA+ to transmit data to their Area. The Area office will use GPRA+ to produce an aggregated Area report.

Implementing GPRA+ is intended to eventually eliminate the need for manual chart audits for evaluating and reporting clinical GPRA indicators.

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1.0 Introduction

The GPRA Reporting System (GPRA+) will produce a report of thirty GPRA indicator measures on demand on local RPMS computers. In addition to producing a report that can be printed on an RPMS system printer, the program can produce patient lists for each of the measures, and finally, a facility GPRA data file for transmission to the Area office where it will be uploaded into the Area office RPMS computer for generation of an Area-wide aggregate report.

Three time periods of data are displayed for each indicator. The current time period is a time period entered by the user. This data is compared to the same time period in the previous year and to the same time period in a baseline year selected by the user. When running the local report the user can also select which of the 30 indicators to include in the report.

When generating the report, all patients in the RPMS database will be examined and those patients who meet the following criteria established for defining an 'active' patient will be used in the report:

- Indian/Alaskan Natives Only—based on Classification of 01 – Indian/Alaskan Native
- Must reside in a community specified by the user in the community taxonomy
- Must have been seen in the 3 years prior to the end of the time period
- Must be alive during the entire time period

This criteria are used in relation to all of the time periods used in the report (baseline, current reporting period and previous year reporting period) to determine which patients will be included in the report.

The thirty indicators used in this GPRA report are shown in the table on the following pages.

1.1 Table of GPRA Indicators

Indicator #	Name	Description	Denominator
1	Diabetes	Continue tracking area age specific diabetes prevalence rates to identify trends in the age specific prevalence of diabetes (as a surrogate marker for diabetes incidence) for the AI/AN population.	All active users as defined above.

Indicator #	Name	Description	Denominator
1B	Historical National Diabetes Prevalence Rates	This is the same of indicator #1 except that rather than using a true prevalence calculation of patients having the Dx on or prior to a specified date, this will count the number of patients seen with diabetes in the past year. This is the method used in the past by IHS for calculating prevalence, so indicator 1B will permit comparisons to past prevalence rates.	All active users as defined above.
2A	Diabetes – Reduce Diabetic Complications. Glycemic Control	Continue the trend of improved glycemic control in the proportion of I/T/U clients with diagnosed diabetes.	All active users diagnosed with diabetes ever (numerator from Indicator #1).
2B	Diabetes – Reduce Diabetic Complications. Glycemic Control	Continue the trend of improved glycemic control in the proportion of I/T/U clients with diagnosed diabetes.	All active users diagnosed with diabetes ever (numerator from Indicator #1), PLUS the patient must have had 2 visits in the past year and the first ever Diabetes diagnosis (using POV) of 250.00-250.93 must have occurred >1 year prior to the end of the time period.
2C	Diabetes – Reduce Diabetic Complications. Glycemic Control	Continue the trend of improved glycemic control in the proportion of I/T/U clients with diagnosed diabetes.	All active users diagnosed with diabetes ever (numerator from Indicator #1), PLUS - the patient must have had at least 2 visits (one with a Diabetes Purpose of visit, with a primary care provider. Primary care providers are determined based on provider class codes. A list of the primary care provider disciplines is provided a the end of this document. - the patient must be 19 years old or greater at the beginning of the time period. - the patient must never have had a creatinine greater than 5.
3A	Diabetes – Reduce Diabetic Complications. Blood Pressure Control	Continue the trend of improved blood pressure control in the proportion of I/T/U clients with diagnosed diabetes who have achieved blood pressure control standards.	All active users diagnosed with diabetes ever (numerator from Indicator #1).

Indicator #	Name	Description	Denominator
3B	Diabetes – Reduce Diabetic Complications. Blood Pressure Control	Continue the trend of improved blood pressure control in the proportion of I/T/U clients with diagnosed diabetes who have achieved blood pressure control standards.	All active users diagnosed with diabetes ever (numerator from Indicator #1), PLUS the patient must have had 2 visits in the past year and the first ever Diabetes diagnosis (using POV) of 250.00-250.93 must have occurred >1 year prior to the end of the time period.
3C	Diabetes – Reduce Diabetic Complications. Blood Pressure Control	Continue the trend of improved blood pressure control in the proportion of I/T/U clients with diagnosed diabetes who have achieved blood pressure control standards.	All active users diagnosed with diabetes ever (numerator from Indicator #1), PLUS - the patient must have had at least 2 visits (one with a Diabetes Purpose of visit, with a primary care provider. Primary care providers are determined based on provider class codes. A list of the primary care provider disciplines is provided a the end of this document. - the patient must be 19 years old or greater at the beginning of the time period. - the patient must never have had a creatinine greater than 5.
4A	Diabetes – Reduce Diabetic Complications. Dyslipidemia Assessment	Continue the trend of increasing the proportion of I/T/U clients with diagnosed diabetes who have been assessed for dyslipidemia using LDL as the screening test.	All active users diagnosed with diabetes ever (numerator from Indicator #1).
4B	Diabetes – Reduce Diabetic Complications. Dyslipidemia Assessment	Continue the trend of increasing the proportion of I/T/U clients with diagnosed diabetes who have been assessed for dyslipidemia using LDL as the screening test.	All active users diagnosed with diabetes ever (numerator from Indicator #1), PLUS the patient must have had 2 visits in the past year and the first ever Diabetes diagnosis (using POV) of 250.00-250.93 must have occurred >1 year prior to the end of the time period.

Indicator #	Name	Description	Denominator
4C	Diabetes – Reduce Diabetic Complications. Dyslipidemia Assessment	Continue the trend of increasing the proportion of I/T/U clients with diagnosed diabetes who have been assessed for dyslipidemia using LDL as the screening test.	All active users diagnosed with diabetes ever (numerator from Indicator #1), PLUS - the patient must have had at least 2 visits (one with a Diabetes Purpose of visit, with a primary care provider. Primary care providers are determined based on provider class codes. A list of the primary care provider disciplines is provided a the end of this document. - the patient must be 19 years old or greater at the beginning of the time period. - the patient must never have had a creatinine greater than 5.
5A	Diabetes – Reduce Diabetic Complications. Nephropathy Assessment	Continue the trend of increasing the proportion of I/T/U clients with diagnosed diabetes assessed for nephropathy.	All active users diagnosed with diabetes ever (numerator from Indicator #1).
5B	Diabetes – Reduce Diabetic Complications. Nephropathy Assessment	Continue the trend of increasing the proportion of I/T/U clients with diagnosed diabetes assessed for nephropathy.	All active users diagnosed with diabetes ever (numerator from Indicator #1), PLUS the patient must have had 2 visits in the past year and the first ever Diabetes diagnosis (using POV) of 250.00-250.93 must have occurred >1 year prior to the end of the time period.
5C	Diabetes – Reduce Diabetic Complications. Nephropathy Assessment	Continue the trend of increasing the proportion of I/T/U clients with diagnosed diabetes assessed for nephropathy.	All active users diagnosed with diabetes ever (numerator from Indicator #1), PLUS - the patient must have had at least 2 visits (one with a Diabetes Purpose of visit, with a primary care provider. Primary care providers are determined based on provider class codes. A list of the primary care provider disciplines is provided a the end of this document. - the patient must be 19 years old or greater at the beginning of the time period. - the patient must never have had a creatinine greater than 5.

Indicator #	Name	Description	Denominator
6	Women's Health – Reduce Cervical Cancer Mortality. Pap Smear	Increase the proportion of women ages 18 to 70 years old who had a Pap Smear in the one year prior to the end of the time period.	All females in the active population between the ages of 18 and 70 without a documented history of Hysterectomy.
6A	Women's Health – Reduce Cervical Cancer Mortality. Pap Smear	Increase the proportion of women ages 18 to 70 years old who had a Pap Smear in the three years prior to the end of the time period.	All females in the active population between the ages of 18 and 70 without a documented history of Hysterectomy.
7	Women's Health – Reduce Breast Cancer Mortality. Mammogram	Increase the proportion of AI/AN women ages 40 to 69 years old who had a Screening Mammography in the two years prior to the end of the time period.	All females in the active population between the ages of 40 and 69 years
8	Child Health -- Well Child Visits.	Increase the proportion of AI/AN children served by HIS receiving a minimum of four Well Child Visits by 27 months of age.	All patients in the active user population who turned 27 months old during the time period.
12	Oral Health – Access to Dental Service	Increase the proportion of AI/AN population who obtain access to dental services.	All patients in the active user population.
13	Oral Health – Dental Sealants	Increase the percent of AI/AN children 6-8 and 14-15 years old who have received protective dental sealants on permanent molar teeth.	All patients in the active user population who were ages 6-8 or 14-15 at the beginning of the time period.
14	Oral Health – Improve Oral Health Status of patients with Diabetes.	Increase the proportion of AI/AN population diagnosed with diabetes who obtain access to dental services who obtain access to dental services.	All patients in the active user population diagnosed with diabetes as defined in Indicator #1 (at least one diagnosis of diabetes ever).
22	Public Health Nursing	Increase the total number of public health nursing services (primary and secondary treatment and preventive services) provided to individuals in all settings. Increase the number of home visits made by public health nurses.	All patients in the active user population.
23	Child Health -- Immunizations	Reduce the incidence of preventable disease. Increase the proportion of AI/AN children who have completed all recommended immunizations for age 27 months.	All patients in the active user population who turned 27 months old in the year prior to the end of the time frame.
24	Adult Immunizations	Increase the pneumococcal and influenza vaccination levels among adult diabetics ages 65 years and older.	All patients diagnosed with diabetes (see Indicator #1) who were age 65 or older at the beginning of the time period.

Indicator #	Name	Description	Denominator
29	Obesity	Reduce Childhood obesity rates by maintaining ongoing Area Age-Specific body mass index (BMI) assessments in AI/AN children. Calculate Ages 2-5, 6-11, 12-19, 20-24, 25-34, 35-44, 45-54, 55-73, >74 Both Genders.	All patients in the active user population ages 2-74.
30	Tobacco Use and Exposure to second hand smoke	Reduce illness, disability, and death related to tobacco use and exposure to second hand smoke. Reduce are age-specific prevalence rates for the usage of tobacco products and for Smoker in Home.	Denominator 1: All Active Patients ages 12-17. Denominator 2: All active patients ages 18-34. Denominator 3: All active patients ages 35-54. Denominator 4: All active patients ages over 54.
A	Mental Health	Determine the proportion of AI/AN persons diagnosed with diabetes and a diagnosis of depressive disorders.	Denominator: All patients diagnosed with diabetes (see Indicator #1)
B	Colorectal Cancer. Reduce the Colorectal Cancer death rate	Increase the proportion of AI/AN persons who have had screening for Colorectal Cancer.	All active users over age 50.
C	Diet and Exercise Education	Increase the quality, availability, and effectiveness of educational services designed to prevent disease and improve the health and quality of life. Increase the proportion of persons who are provided patient education on diet and exercise.	All active users.
D	Diabetic Eye Exams	Evaluate the proportion of diabetic patients who have received a yearly eye exam.	All active diabetic patients (see Indicator #1).

2.0 Taxonomy Setup

This section will describe what needs to be done to set up all taxonomies needed for the GPRA+ program. Taxonomies are used to find data items in PCC in order to determine if an item was done for the patient. Taxonomies are groupings of functionally related data elements. Taxonomies identify specific codes, code ranges, or terms that need to be used by PCC computer programs including this GPRA+ Report.

For data elements like diagnoses and procedures, a taxonomy simply identifies the codes that a program should look for. For data elements like medications and lab tests, taxonomies are used to mitigate the variations in terminology that exist in RPMS tables from one facility to another.

For example, one site's Lab table might contain the term *Glucose Test* while another site's table may contain the term *Glucose* for the same test. PCC programs have no means for dealing with variations in spelling, spacing, and punctuation. So rather than attempting to find all potential spellings of a particular lab test, the programs look for taxonomies, whose names are standardized at every facility. In this example, the various programs would use the "DM Audit Glucose Tests Taxonomy" which contains all varieties of glucose tests used at that particular facility as they are spelled and punctuated at that facility.

Codes and terms contained in a taxonomy are referred to as members of the taxonomy.

In most cases, the taxonomy will already exist on your system because it is used by another RPMS application. The user will need to review the taxonomies and make sure that all appropriate entries are in the taxonomies. The table below can be used as a checklist.

2.1 Taxonomies Utilized In The GPRA+ Reporting System

Taxonomy Name	Description	Members	Indicators Used with	√
COMMUNITY TAXONOMY (name of this taxonomy is determined by the site)	Contains all of the communities that are considered in your service area. All patients who live in these communities will be reviewed for inclusion in the report.	Communities of residence in the service area.	ALL	
SURVEILLANCE DIABETES	Contains all Diabetes ICD9 Diagnoses codes. This taxonomy will already be present on the RPMS system. This taxonomy does not need to be updated.	ICD Dx Codes 250.00-250.93	1, 1B, 2A, 2B,2C, 3A, 3B, 3C, 4A, 4B, 4C, 5A, 5B, 5C, A, D	√
BGP DEPRESSIVE DISORDERS	Contains all Depressive Disorder ICD9 codes. This taxonomy is	296.00 – 313.1	A	√

	distributed with the GPRA software and should not need to be updated.			
BGP PRIMARY PROVIDER DISC	Contains all primary provider discipline codes. This taxonomy is distributed with this software package and should not need to be modified.	00, 11, 16, 17, 18, 21, 25, 33, 41, 44, 45, 49, 64, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, A1	2C, 3C, 4C, 5C	√
BGP PRIMARY CARE CLINICS	Contains all primary care clinic codes as defined by IHS. This taxonomy is distributed with this software package and should not need to be modified.	01, 06, 13, 20, 24, 28	2C, 3C, 4C, 5C	√
BGP CPT PAP	Contains all CPT codes that would indicate that a Pap Smear was done. This taxonomy is distributed with this software package and should not need to be modified.	88141 - 88150 88152 - 88158 88164 - 88167	6, 6A	√
BGP CPT MAMMOGRAM	Contains all CPT codes that would indicate that a Mammogram was done. This taxonomy is distributed with this software package and should not need to be modified.	76090 – 76092	7	√
BGP CPT FLU	Contains all CPT codes that would indicate that an Influenza vaccine was given. This taxonomy is distributed with this package and should not need to be modified.	90657 – 90660	24	√
BGP DENTAL SEALANT OP SITES	Contains all Dental Operative Sites that refer to the following teeth: 2, 3, 4, 15, 18, 19,30, 31	You should work with the dental staff to set up this taxonomy. It can be set up using QMAN following the instructions presented below.	13	
BGP GPRA EX EDUC TOPICS	Contains all education topics that pertain to diet and exercise education. This taxonomy should be reviewed by the site so that all locally developed topics can be added.	Suggested topics: OBS-EX, OBS-LA, OBS-N, OBS-DIET, TO-EX, WL-EX, WL-LA, WL-N, WL-DIET	C	
BGP GPRA FOB TESTS	Contains all Fecal Occult Blood Lab Tests	Occult Blood Fecal Occult Blood	B	
DM AUDIT URINE PROTEIN TAX	Contains all Urine Protein Lab Tests.	Urine Protein Urine Protein Screen	5A, 5B, 5C	
DM AUDIT TRIGLYCERIDE TAX	Contains all Triglyceride Lab Tests	Triglyceride	4A, 4B, 4C	
DM AUDIT HDL TAX	Contains all HDL Lab Tests	HDL	4A, 4B, 4C	
DM AUDIT LDL CHOLESTEROL	Contains all LDL Cholesterol Lab Tests	LDL	4A, 4B, 4C	

TAX				
DM AUDIT LIPID PROFILE TAX	Contains all Lipid Profile Lab Tests	Lipid Profile	4A, 4B, 4C	
DM AUDIT GLUCOSE TESTS TAX	Contains all Glucose Lab Tests	Glucose, Fasting Glucose, 4Hr, 2Hr, GTT, Finger Stick, Whole Blood Glucose, Blood Sugar, Capillary Glucose, Accucheck, Lifescan	2A, 2B, 2C	
DM AUDIT MICROALBUMINURIA TAX	Contains all Microalbuminuria Lab Tests.	Microalbumunia Micral Microalbumunia, Urine A/C Ratio AC Ratio ACR Microalbumin/Creatinine Ratio Microalbumin Random	5A, 5B, 5C	
DM AUDIT HGB A1C TAX	Contains all HGB A1C lab tests.	Hgb A1c, A1c Hemoglobin A1c Glycosolated Hgb		

3.0 Implementation and Maintenance

The GPRA+ Reporting System occupies the BGP namespace. Options, security locks/keys, templates, routines, and globals are namespaced BGP.

3.1 System Requirements

- Kernel 8.0 or higher
- FileMan 21 or higher
- IHS Patient Dictionaries (AUPN) Version 99.1 through patch 6
- PCC Management Reports Version 3.0 through patch 11
- Taxonomy System Version 5.1
- XB/ZIB Utilities Version 3.0 through patch 8

4.0 Security Keys

Name: BGPZAREA

Descriptive Name: BGP AREA REPORT

Description: This key unlocks the area report options on the main BGPMENU. This key should only be assigned at the Area office level.

Name: BGPZMENU

Descriptive Name: BGP MAIN MENU - GPRA

Description: This key unlocks the main GPRA+ menu. It should be assigned to all users who need to run GPRA reports.

5.0 Routines

Routine Name	Routine Description
BGPAP	IHS/CMI/LAB - IHS GPRA print
BGPAP1	IHS/CMI/LAB - print ind 1
BGPAP12	IHS/CMI/LAB - print ind 12
BGPAP13	IHS/CMI/LAB - print ind 13
BGPAP14	IHS/CMI/LAB - print ind 14
BGPAP1B	IHS/CMI/LAB - print ind 1B
BGPAP2	IHS/CMI/LAB - print ind 2
BGPAP22	IHS/CMI/LAB - print ind 22
BGPAP221	IHS/CMI/LAB - NO DESCRIPTION PROVIDED
BGPAP22A	IHS/CMI/LAB - print ind 22
BGPAP22B	IHS/CMI/LAB - print ind 22
BGPAP22C	IHS/CMI/LAB - print ind 22
BGPAP23	IHS/CMI/LAB - print ind 23
BGPAP24	IHS/CMI/LAB - print ind 24
BGPAP3	IHS/CMI/LAB - print ind 3
BGPAP30	IHS/CMI/LAB - IHS GPRA print
BGPAP30A	IHS/CMI/LAB - IHS GPRA print
BGPAP30B	IHS/CMI/LAB - IHS GPRA print
BGPAP30C	IHS/CMI/LAB - IHS GPRA print
BGPAP4	IHS/CMI/LAB -print ind 4
BGPAP5	IHS/CMI/LAB - print ind 5
BGPAP6	IHS/CMI/LAB - print ind 6
BGPAP7	IHS/CMI/LAB - print ind 7
BGPAP8	IHS/CMI/LAB - print ind 8
BGPAPA	IHS/CMI/LAB - IHS GPRA print
BGPAPB	IHS/CMI/LAB - IHS GPRA print
BGPAPC	IHS/CMI/LAB - IHS GPRA print
BGPAPD	IHS/CMI/LAB - IHS GPRA print
BGPAPH	IHS/CMI/LAB - NO DESCRIPTION PROVIDED
BGPD	IHS/CMI/LAB - IHS GPRA - report for local use
BGPD0	IHS/CMI/LAB - DISPLAY IND LISTS
BGPD1	IHS/CMI/LAB - IHS area GPRA
BGPD12	IHS/CMI/LAB - indicator 12
BGPD13	IHS/CMI/LAB - indicator 13
BGPD14	IHS/CMI/LAB - indicator 14
BGPD1B	IHS/CMI/LAB - ind 1b
BGPD2	IHS/CMI/LAB - indicator 2
BGPD22	IHS/CMI/LAB - indicator 18
BGPD23	IHS/CMI/LAB - indicator 23
BGPD24	IHS/CMI/LAB - indicator 24
BGPD29	IHS/CMI/LAB - indicator 29

Routine Name	Routine Description
BGPD3	IHS/CMI/LAB - indicator 3
BGPD30	IHS/CMI/LAB - indicator 30
BGPD31	IHS/CMI/LAB - indicator 31
BGPD32	IHS/CMI/LAB - indicator 32
BGPD4	IHS/CMI/LAB - indicator 4
BGPD5	IHS/CMI/LAB - indicator 5
BGPD6	IHS/CMI/LAB - indicator 6
BGPD7	IHS/CMI/LAB - indicator 7
BGPD8	IHS/CMI/LAB - indicator 8
BGPDA	IHS/CMI/LAB - indicator A
BGPDAREA	IHS/CMI/LAB - IHS area GPRA
BGPDB	IHS/CMI/LAB - indicator B
BGPDC	IHS/CMI/LAB - indicator C
BGPDD	IHS/CMI/LAB - indicator D
BGPDFTA	IHS/CMI/LAB - IHS area GPRA
BGPDH	IHS/CMI/LAB - cover page for GPRA
BGPDL	IHS/CMI/LAB - DISPLAY IND LISTS
BGPDP	IHS/CMI/LAB - IHS GPRA print
BGPDP1	IHS/CMI/LAB - print ind 1
BGPDP12	IHS/CMI/LAB - print ind 12
BGPDP13	IHS/CMI/LAB - print ind 13
BGPDP14	IHS/CMI/LAB - print ind 14
BGPDP1B	IHS/CMI/LAB - print ind 1B
BGPDP2	IHS/CMI/LAB - print ind 2
BGPDP22	IHS/CMI/LAB - print ind 22
BGPDP221	IHS/CMI/LAB - NO DESCRIPTION PROVIDED
BGPDP22A	IHS/CMI/LAB - print ind 22
BGPDP22B	IHS/CMI/LAB - print ind 22
BGPDP22C	IHS/CMI/LAB - print ind 22
BGPDP23	IHS/CMI/LAB - print ind 23
BGPDP24	IHS/CMI/LAB - print ind 24
BGPDP29	IHS/CMI/LAB - IHS GPRA print
BGPDP3	IHS/CMI/LAB - print ind 3
BGPDP30	IHS/CMI/LAB - IHS GPRA print
BGPDP30A	IHS/CMI/LAB - IHS GPRA print
BGPDP30B	IHS/CMI/LAB - IHS GPRA print
BGPDP30C	IHS/CMI/LAB - IHS GPRA print
BGPDP31	IHS/CMI/LAB - print ind 31
BGPDP32	IHS/CMI/LAB - print ind 32
BGPDP4	IHS/CMI/LAB -print ind 4
BGPDP5	IHS/CMI/LAB - print ind 5
BGPDP6	IHS/CMI/LAB - print ind 6
BGPDP7	IHS/CMI/LAB - print ind 7
BGPDP8	IHS/CMI/LAB - print ind 8

Routine Name	Routine Description
BGPDPA	IHS/CMI/LAB - IHS GPRA print
BGPDPARP	IHS/CMI/LAB - IHS GPRA print
BGPDPB	IHS/CMI/LAB - IHS GPRA print
BGPDPC	IHS/CMI/LAB - IHS GPRA print
BGPDPD	IHS/CMI/LAB - IHS GPRA print
BGPDPH	IHS/CMI/LAB - NO DESCRIPTION PROVIDED
BGPDS	IHS/CMI/LAB - IHS GPRA print
BGPDT	IHS/CMI/LAB - 2001 DIABETES AUDIT
BGPDU	IHS/CMI/LAB - GPRA utility calls
BGPDUP	IHS/CMI/LAB - NO DESCRIPTION PROVIDED
BGPPOST	IHS/CMI/LAB - NO DESCRIPTION PROVIDED
BGPTX	IHS/CMI/LAB -CREATED BY ^ATXSTX ON MAR 13, 2002
BGPTXA	IHS/CMI/LAB -CREATED BY ^ATXSTX ON MAR 13, 2002
BGPTXB	IHS/CMI/LAB -CREATED BY ^ATXSTX ON MAR 13, 2002
BGPTXC	IHS/CMI/LAB -CREATED BY ^ATXSTX ON MAR 13, 2002
BGPTXD	IHS/CMI/LAB -CREATED BY ^ATXSTX ON MAR 13, 2002

6.0 Callable Routines

There are no published entry points in this package.

7.0 Data Dictionaries

XREF	DD	FLD NUM	FIELD NAME
B	90240.01	.01	BEGINNING DATE
-B	90240.018	.01	PHN VISIT PRIMARY DX
-B	90240.24	.01	CURRENT INJURIES
-B	90240.25	.01	INJURIES 98 PREV
-B	90240.26	.01	INJURIES 98
-B	90240.28	.01	COMMUNITIES
-B	90240.048	.01	PHN VISIT PRIMARY DX PR
-B	90240.088	.01	PHN PRIMARY DIAGNOSIS BL
--B	90240.2424	.01	E CODES
--B	90240.2525	.01	E CODE TALLY
--B	90240.2626	.01	E CODES

8.0 Files

File #	Global	File Name	Description
90240.01	BGPD	BGP IHS GPRA DATA	This file contains the calculated data for the gpra report.

9.0 Exported Options

BGP GPRA AREA REPORT

Menu Text: Run AREA GPRA Report (to be used at Area only)
Type: run routine **Creator**: BUTCHER,LORI
Lock: BGPZAREA **X Action Present**: YES
Exit Action: D BANNER^BGPDU **Routine**: BGPDAREA
Uppercase Menu Text: RUN AREA GPRA REPORT (TO BE US

BGP GPRA FAC TO AREA RPT

Menu Text: Run GPRA Report for Local Use and AREA Export
Type: run routine **Creator**: BUTCHER,LORI
X Action Present: YES **Exit Action**: D BANNER^BGPDU
Routine: BGPDFTA
Uppercase Menu Text: RUN GPRA REPORT FOR LOCAL USE

BGP GPRA LOCAL REPORT

Menu Text: Run GPRA Report for Local Use
Type: run routine **Creator**: BUTCHER,LORI
X Action Present: YES **Exit Action**: D BANNER^BGPDU
Routine: BGPD
Uppercase Menu Text: RUN GPRA REPORT FOR LOCAL USE

BGP GPRA UPLOAD FILE

Menu Text: Upload GPRA Data File from Site
Type: run routine **Creator**: BUTCHER,LORI
Lock: BGPZAREA **X Action Present**: YES
Exit Action: D BANNER^BGPDU **Routine**: BGPDUP
Uppercase Menu Text: UPLOAD GPRA DATA FILE FROM SIT

BGP INDICATOR 32 TESTS

Menu Text: Enter/Edit Indicator 32 Lab Tests
Type: edit **Creator**: BUTCHER,LORI
E Action Present: YES **X Action Present**: YES
Exit Action: D BANNER^BGPDU
Entry Action: W !!!,"Enter all Lab Tests and Positive Values associated with I ndicator 32"
Dic {Dic}: BGPILAB(**Dic(0):** AEMQL
Die: BGPILAB(**Dr {Die}:** [BGP INDICATOR 31 TESTS]
Uppercase Menu Text: ENTER/EDIT INDICATOR 32 LAB TE

BGP TAXONOMY CHECK

Menu Text: Check for Taxonomies Required by the GRPA Report
Type: run routine **Creator**: BUTCHER,LORI
X Action Present: YES **Exit Action**: D BANNER^BGPDU
Routine: TAXCHK^BGPDT
Uppercase Menu Text: CHECK FOR TAXONOMIES REQUIRED

BGPMENU

Menu Text: IHS GPRA Performance Indicator Menu
Type: menu **Creator**: BUTCHER,LORI
Lock: BGPZMENU **E Action Present**: YES
Item: BGP GPRA LOCAL REPORT **Synonym**: LGP
Display Order: 10
Item: BGP GPRA FAC TO AREA RPT **Synonym**: FTA
Display Order: 20
Item: BGP GPRA AREA REPORT **Synonym**: ARP
Display Order: 40
Item: BGP GPRA UPLOAD FILE **Synonym**: UPL
Display Order: 30
Item: BGP TAXONOMY CHECK **Synonym**: TXCH
Display Order: 50
Item: APCL TAXONOMY SETUP **Synonym**: TAX
Display Order: 99
Entry Action: D BANNER^BGPDU **Timestamp**: 58895,48890
Uppercase Menu Text: IHS GPRA PERFORMANCE INDICATOR

10.0 Archiving and Purging

There is no archiving and purging in this package.

11.0 External Relations

This package calls the following documented entry points:

Routine	Is Invoked By:
^%DT	dd90240.01
COMMA^%DTC	BGPAP, BGPAP1, BGPAP12, BGPAP13, BGPAP14, BGPAP1B, BGPAP2, BGPAP22, BGPAP22A, BGPAP22B, BGPAP22C, BGPAP23, BGPAP24, BGPAP3,BGPAP30, BGPAP30A, BGPAP30B, BGPAP30C, BGPAP4, BGPAP5, BGPAP6, BGPAP7, BGPAP8, BGPAPA, BGPAPB, BGPAPC, BGPAPD, BGPAPH, BGPDP, BGPDP1, GPDP12, BGPDP13, BGPDP14, BGPDP1B, BGPDP2, BGPDP22, GPDP22A, BGPDP22B BGPDP22C, BGPDP23, BGPDP24, BGPDP29, GPDP3, BGPDP30, BGPDP30A BGPDP30B, BGPDP30C,BGPDP31, BGPDP32, BGPDP4, BGPDP5, BGPDP6 BGPDP7, BGPDP8, BGPDPA, BGPDPARP, BGPDPB, BGPDPC, BGPDPD, BGPDPH
CALL^%GCH	BGPD1
^%ZIS	BGPD, BGPDAREA, BGPDFTA
HOME^%ZIS	BGPDFTA, BGPDUP
^%ZISC	BGPD, BGPDAREA, BGPDFTA, BGPDUP
$$OPEN^%ZISH	BGPDUP
$$STATUS^%ZISH	BGPDUP
^%ZTLOAD	BGPD, BGPDAREA, BGPDFTA
$$START1^APCLDF	BGPD1, BGPD12, BGPD13, BGPD14, BGPD1B, BGPD2, BGPD22, BGPD24, BGPD29, BGPD3, BGPD31, BGPD32, BGPD4, BGPD5, BGPD6, BGPD7, BGPDA, BGPDB, BGPDC, BGPDD
$$CLINIC^APCLV	BGPD14, BGPD2, BGPD22, BGPD3, BGPD8, BGPDD
$$PRIMPOV^APCLV	BGPD14, BGPD8, BGPDD
$$PRIMPROV^APCLV	BGPD14, BGPD2, BGPDD
$$ICD^ATXCHK	BGPD2,BGPDU
BULL^ATXSTX2	BGPTXA, BGPTXB, BGPTXC, BGPTXD
KILL^ATXSTX2	BGPTXA, BGPTXB, BGPTXC, BGPTXD
TAX^ATXSTX2	BGPTXA, BGPTXB, BGPTXC, BGPTXD
$$AGE^AUPNPAT	BGPD1, BGPD2, BGPD22
$$BEN^AUPNPAT	BGPD1
$$DOB^AUPNPAT	BGPD1, BGPD24
$$DOD^AUPNPAT	BGPD1
$$HRN^AUPNPAT	BGPDS
KILL^AUPNPAT	BGPD, BGPDAREA, BGPDFTA
IMMFORC^BIRPC	BGPD23
^DIC	BGPD, BGPDFTA, BGPPOST

Routine	Is Invoked By:
FILE^DICN	BGPDUP
^DIK	BGPD, BGPDAREA, BGPDFTA, BGPDUP, BGPPOST
IX1^DIK	BGPDUP, BGPPOST
IXALL^DIK	BGPD1
^DIR	BGPAP, BGPAPH, BGPD, BGPD0, BGPDAREA, BGPDFTA, BGPDH, BGPDL, BGPDP, BGPDPH, BGPDS, GPDT, BGPDUP,
EN^VALM	BGPD0, BGPDL
TERM^VALM0	BGPD0, BGPDL
CLEAR^VALM1	BGPD0, BGPDL
FULL^VALM1	BGPD0, BGPDL
^XBDBQUE	BGPD, BGPDAREA, BGPDT
$$VAL^XBDIQ1	BGPD30, BGPDAREA
$$VALI^XBDIQ1	BGPD22
^XBFMK	BGPD, BGPDAREA, BGPDFTA, BGPDUP, BGPPOST
^XBGSAVE	BGPDFTA
EN^XBVK	BGPD,BGPDAREA, BGPDFTA, BGPDUP, BGPPOST
$$FMADD^XLFDT	BGPD, BGPD1, BGPD12, BGPD14, BGPD1B, BGPD2, BGPD23, BGPD24, BGPD29, BGPD3, BGPD32, BGPD4, BGPD5, BGPD6, GPD7, BGPD8, BGPDA, BGPD29, BGPD3, GPD32, BGPD4, BGPD5, BGPD6, BGPD7, GPD8,BGPDA, BGPDB, BGPDC, BGPDD, BGPDU
$$FMDIFF^XLFDT	BGPD2, BGPD22
$$FMTE^XLFDT	BGPAPH, BGPD, BGPD1, BGPD12, BGPD13, BGPD14, BGPD1B, BGPD2, BGPD22, BGPD24, BGPD29, BGPD3, BGPD31, BGPD32, BGPD4, BGPD5, BGPD6, BGPD7, BGPDA, BGPDAREA, BGPDB, BGPDD, BGPDFTA, BGPDH, BGPDPH, BGPDS, BGPDU
$$UP^XLFSTR	BGPD2, BGPD4
$$ADD^XPDMENU	BGPPOST
DISP^XQORM1	BGPD0, BGPDL

12.0 Internal Relations

All users should be given the access to the appropriate options and keys to them, as needed. All of the options in this system stand alone.

13.0 How to Generate Online Documentation

The file number range for this package is 90240. The namespace is BGP. All templates, routines, screen forms, etc. begin with BGP.

This section describes some of the methods by which users can generate IHS RPMS GPRA Reporting system technical documentation. Online technical documentation pertaining to the IHS RPMS GPRA Reporting software, in addition to that which is located in the help prompts and on the help screens throughout the IHS RPMS GPRA Reporting package, can be generated through the use of several Kernel options. These include, but are not limited to, the following:

- %INDEX
- Menu Management
- Inquire Option
- Print Option File
- VA FileMan
- Data Dictionary Utilities
- List File Attributes

Entering question marks at the "Select...Option" prompts can also provide users with valuable technical information. For example, a single question mark (?) lists all options that can be accessed from the current option. Entering two question marks (??) lists all options accessible from the current one, showing the formal name and lock for each. Three question marks (???) displays a brief description for each option in a menu, whereas an option name preceded by a question mark (?OPTION) shows extended help, if available, for that option.

For a more exhaustive option listing and further information about other utilities that supply online technical information, please consult the DHCP Kernel Reference manual.

13.1 %INDEX

This option analyzes the structure of a routine to determine in part if the routine adheres to RPMS Programming Standards. The %INDEX output can include the following components:

- Compiled list of errors and warnings
- Routine listing
- Local variables
- Global variables
- Naked globals
- Label references

- External references

By running %INDEX for a specified set of routines, you are afforded the opportunity to discover any deviations from RPMS Programming Standards that exist in the selected routines and to see how routines interact with one another (i.e., which routines call or are called by other routines).

To run %INDEX for the IHS RPMS GPRA Reporting package, specify the BGP namespace at the Routine(s)?> prompt.

13.2 Inquire Option

This menu management option provides the following information about a specified option:

- Option name
- Menu text
- Option description
- Type of option
- Lock (if any)

In addition, all items on the menu are listed for each menu option. To secure information about IHS RPMS GPRA Reporting options, you must specify the BGP namespace.

13.3 Print Option File

This utility generates a listing of options from the Option file (#19). You can choose to print all of the entries in this file or you can specify a single option or range of options. For a list of IHS RPMS GPRA Reporting options, please refer to the Exported Options section of this manual.

13.4 List File Attributes

This VA FileMan option allows you to generate documentation pertaining to files and file structure. Using the Standard format of this option yields the following data dictionary information for a specified file:

- File name and description
- Identifiers
- Cross-references
- Files pointed to by the file specified
- Files that point to the file specified input, print, and sort templates

In addition, the following applicable data is supplied for each field in the file:

- Field name, number, title, and description
- Global location
- Help prompt
- Cross-references
- Input transform
- Date last edited
- Notes

Using the Global Map format of this option generates an output that lists the following information:

- All cross-references for the file selected
- Global location of each field in the file
- Input, print, and sort templates

For a comprehensive listing of GPRA+ package files, please refer to the files section of this manual.

14.0 SAC Exemptions

This program uses a standard global for export of data to the Area office. The global is called ^BGPDATA(and is killed at the root level in the BGPDFTA routine.

The kill of these unsubscripted globals has been approved by the Standards and Conventions committee.

15.0 Glossary

Archiving	The storing of historical or little-used data off-line (often on tape).
Banner	A line of text with a user's name and domain.
Browser	An interactive application that displays ASCII text on a terminal that supports a scroll region. The text can be in the form of a word-processing field or sequential local or global array. The user is allowed to navigate freely within the document.
Callable Entry Points	Places in a routine that can be called from an application program.
Cross-reference	An indexing method whereby files can include pre-sorted lists of entries as part of the stored database. Cross-references (x-refs) facilitate look-up and reporting.
Entry Point	Entry point within a routine that is referenced by a "DO" or "GOTO" command from a routine internal to a package.
File	A set of related records or entries treated as a single unit.
FileMan	The database management system for RPMS.
Global	In MUMPS, global refers to a variable stored on disk (global variable) or the array to which the global variable may belong (global array).
ICD	International Classification of Diseases.
INDEX (%INDEX)	A Kernel utility used to verify routines and other MUMPS code associated with a package. Checking is done according to current ANSI MUMPS standards and RPMS programming standards. This tool can be invoked through an option or from direct mode (>D ^%INDEX).
IRM	Information Resource Management. The IHS personnel responsible for information systems management and security.

Kernel	The set of MUMPS software utilities that function as an intermediary between the host operating system and application packages, such as Laboratory and Pharmacy. The Kernel provides a standard and consistent user and programmer interface between application packages and the underlying MUMPS implementation. These utilities provide the foundation for RPMS.
Menu	A list of choices for computing activity. A menu is a type of option designed to identify a series of items (other options) for presentation to the user for selection. When displayed, menu-type options are preceded by the word "Select" and followed by the word "option" as in Select Menu Management option: (the menu's select prompt).
Namespace	A unique set of 2 to 4 alpha characters that are assigned by the database administrator to a software application.
Option	An entry in the Option file. As an item on a menu, an option provides an opportunity for users to select it, thereby invoking the associated computing activity. Options may also be scheduled to run in the background, non-interactively, by TaskMan.
Patient Care Component (PCC)	The central repository for data in the Resource and Patient Management System (RPMS).
Queuing	Requesting that a job be processed at a later time rather than within the current session.
Routine	A program or sequence of instructions called by a program that may have some general or frequent use. MUMPS routines are groups of program lines that are saved, loaded, and called as a single unit via a specific name.
UCI	User Class Identification: a computing area.
Up-Hat (^)	A circumflex, also know as a "hat" or "caret," that is used as a piece delimiter in a global. The up-hat is denoted as "^" and is typed by pressing Shift+6 on the keyboard.
Utility	A callable routine line tag or function. A universal routine usable by anyone.

Variable	A character or group of characters that refers to a value. MUMPS recognizes 3 types of variables: local variables, global variables, and special variables. Local variables exist in a partition of the main memory and disappear at sign-off. A global variable is stored on disk, potentially available to any user. Global variables usually exist as parts of global arrays.

16.0 Contact Information

If you have any questions or comments regarding this distribution, please contact the ITSC Help Desk by:

Phone: (505) 248-4371 or
(888) 830-7280

Fax: (505) 248-4199

Web: http://www.rpms.ihs.gov/TechSupp.asp

Email: RPMSHelp@mail.ihs.gov